

Retail Food Inspection Report

Floyd County Health Department

Telephone (812) 948-4726

Establishment Name HOMEMADE ICE CREAM & PIE KITCHEN	Telephone Number Est 812-590-3580 Own 317-997-8997	Date of Inspection 07/21/2021	ID#
Address 3113 BLACKISTON MILL RD, NEW ALBANY IN 47150			
Owner CHARLIE HENSLEY	Purpose <input checked="" type="checkbox"/> Routine <input type="checkbox"/> Follow-up <input type="checkbox"/> Complaint <input type="checkbox"/> Pre-Operational <input type="checkbox"/> Temporary <input type="checkbox"/> HACCP <input type="checkbox"/> Other (list)	Follow Up	Released 07/31/2021
Owner's Address 2104 PLANTSIDE DR LOUISVILLE, KY 40299		Menu Type 1 _ 2 <u>X</u> 3 _ 4 _ 5 _	
Person in Charge ANNA JUNE			
Responsible Person's Email PK4@PIEKITCHEN.COM			
Certified Food Handler CATRINA SMALL			

CRITICAL ITEMS ARE IDENTIFIED IN THE CHECKLIST AND NARRATIVE COLUMNS MARKED "C"
VIOLATION(S) REPEATED FROM PREVIOUS INSPECTIONS ARE DENOTED IN THE "SUMMARY OF VIOLATIONS" AND IN THE NARRATIVE COLUMN MARKED AS "R"

Section #	C	NC	R	Narrative	To Be Corrected
--		X		Observed sanitizer container at 3 comp almost empty.	
218		X		Observed ice and frost buildup inside of walk in freezer's door. Remove ice for better seal. Door should have a complete seal.	1 week
309		X		Observed exhaust fan in woman's restroom to not be working.	2 weeks
431		X		Observed buildup of dust in bottom section of display cabinet behind the counter. Observed food debris on floors around ice cream cabinet drain and under cooling racks.	2 days

Summary of Violations C 0 NC 4 R 0

Received by (name and title printed):

Inspected by (name and title printed):

Thomas Snider CFS

Received by (signature):

Inspected by (signature):

Thomas Snider

cc:

cc:

cc: